Effective date: July 22, 2013

HOSPITAL STATEMENT OF COST South Dakota Department of Social Services

This form is authorized by SDCL 28-13, and hospitals are required to file the completed form with the Department of Social Services at least annually to participate under the County Poor Relief Program.

Name of Hospital:

WINNER REGIONAL HEALTHCARE CENTER

JUN 2 1 2013

Address:

745 EAST 8TH STREET P.O. BOX 745, WINNER, SD 57580-2677

PROVIDER
REIMBURSEMENT AND AUDITS

Period covered by statement:

January 1, 2012 to December 31, 2012

NOTE: SDCL 28-13-28. A hospital may avail itself of the provisions of this chapter for purposes of determining payment for hospitalization of a medically indigent person only if the hospital has filed a detailed statement of costs with the secretary of social services in the form prescribed by the secretary. The statement of costs shall compute and set forth the ratios of costs to charges for the hospital's fiscal year covered by the statement of costs. The statement of costs shall be filed with the secretary at least annually, unless such period is extended or otherwise provided by the secretary, but a hospital may file a detailed statement of costs or amendments to such a statement once every six months.

NOTE: SDCL 28-13-31. No statement of costs, or amendment thereto, may take effect until approved by the secretary of social services and the expiration of thirty days from the filing thereof, and thereafter, for purposes of this chapter, shall remain in full force and effect until the next statement of costs, or amendment thereto, filed by the hospital pursuant to 28-13-28 is approved by the secretary. Any such statement of costs, or amendments thereto, shall be a public record and be available for inspection at any time in behalf of any board of county commissioners.

DEPARTMENTAL	Column A - Cost	Column B - Charges	Ratio of Cost to Charges
LISTING	(Per Medicare Cost Report)	(Per Medicare Cost Report)	Column A Divided by Column B
INPATIENT ROUTINE			
SERVICE	3,354,044	3,467,716	0.967220
NURSING CARE	5,268,644∉	3,709,186	1.420431
SPECIAL CARE	-	_	
Intensive Care Unit			
Coronary Care Unit	<u> </u>		
Intermediate Care Unit			
Acute Care Unit			
NURSERY CARE	131,659	144,539	∘0.910889∉
ANCILLARY SERVICE	6,621,552	18,549,717	0.356962
OBSERVATION	618,668	971,793	0.636625
RHC	\$88.85.87.85	88 008/005	0.924775
HOME HEALTH AGENCY	377,946	230,967	≥1.636364

Please complete the reverse side of this form.